

**PUIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

D. O. Vou. No. _____

Bu. Vou. No. _____

Page 1 of 1

U. S. _____

(Department, bureau, or establishment)

Voucher prepared at _____

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. _____

To _____

The Firewal Company, Inc.

(Payee)

Buffalo 25, New York

(Address)

(City)

(State)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms Invoice No.	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		36256 36269				20,856 7,126	07 14
Use continuation sheet(s) if necessary							

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Shipped from _____

to _____

Weight _____

Government B/L No. _____

Total

27,982 21 /

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

(Sign original only)

Differences _____

Date _____ *Payee _____

(This certificate not required when a like certificate is made by payee on attached bill or bills)

Amount verified; correct for

(Signature or initials)

27,982 27
STAT

Per _____

Title _____

Contract No. HF-CT-692

Date _____

Req. No. _____

Date _____

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ _____

By _____

**SIGN
ORIGINAL
ONLY**

Title _____

Title _____

Date _____

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. _____ dated _____, 19____, for \$ _____ } on Treasurer of the United States in
{ Cash, \$ _____, on _____, 19____ } Payee _____ favor of payee named above.

(Sign original only)

Per _____

Title _____

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Firewheel

THE JEWEL COMPANY, INC.

ROADWAY

BUFFALO 25, NEW YORK

MANUFACTURING

FILES

ENGINEERING

**CHARGE
TO**

CONTRACT HF-CT-692

DATE **12/9/58**

SHIP TO
PROJECT DRAGONLADY
WARNER ROBINS AIR MAT'L AREA
ROBINS AIR FORCE BASE, GEORGIA
WHSE. 17, STOREROOM "B".

PERIOD- 1 NOV. 1957 - JUNE 30, 1958

DATE OF ORDER	CUST. ORDER NO.	OUR ORDER NO.	SALESMAN OR AGENT	DATE SHIPPED	SHIPPED VIA	SEE 30 1 of 1 10 DAYS.
	HF-CT-692	2613				

ITEM	QUANTITY			LIST	GROSS	NET TOTAL
	ORDERED	SHIPPED	S.O.			
3621BL PRESSURE SUIT FOR 60, 61, 62, 63, 65, 66, 67, 70, 71, 78, 80, 85, 86, 87, 89, 91, 93, 94, 97, 100, 102, 106, 108, 115, 117, 135, 139, 141, 142, 143		30		866.20	25,986.00	STAT
EXHIBIT NO: 58-6						STAT
FRT CHG. BILLED ON SEPERATE INVOICE.						25,986.00
TOTAL FUNDS ALLOTTED						
" " ANTICIPATED						
LESS PREVIOUS INVOICES						
"I certify that the above bill is correct & just & that payment therefore has not been received."						
THE FIREWEL CO., INC.						

Seller represents that with respect to the production of the articles and/or the performance of the services covered by this invoice, it has fully complied with section 12 (A) of the Fair Labor Standards Act of 1938, as amended.

No claims for shortage allowed unless made within 5 days after receipt of goods. No claims will be allowed for latent damages. Goods which have proven defective in manufacturing will be replaced if claim is made within sixty days from date of shipment.

Amend 3 authorizing 50 funds to cover this notice, we received from *Receiving attached*
 Contract on 2/2/50. This is the 1st of 2 documents.

Approved For Release 2008/12/31 : CIA-RDP67B00539R000700030012-9